Hayne

CHECK ONE	IN LA ETHICS AND	FORM	STATEMENT
CHECK ONE:	epula ETHICS AVO	DR-1	OF
This is an initial* Statement of Organization	5.20.08	(Rev. 04/2008)	ORGANIZATION
This is an amended* Statement of Organization	19 MAY 2:	For Office Use C	
*An initial Statement of Organization must be filled within 10 days of the commaking expenditures or incurring indebtedness expenditures or incurring indebtedness expenditures.	nmittee's accepting contributions,	Comm. #	<u> 2111 Y</u>
making expenditures, or incurring indebtedness exceeding \$750. Amendm a change. Penalties may be imposed for late-filed Statements of Organizat		Indexed	
To million that exceeds at 30 III activity for another office shall file within 10	dovo oithor	Audited	
- The first incommunity the campaign for the new office sol	ıaht.	Computer	
COMMITTEE NAME   (A candidate's committee must include the			
Continue in the continue of th	candidate's last name in the name of	f the committee.)	
County Central Committee	Wayne Co.	De.C	
IMPORTANT: Indicate type of committee you are reporting for:		<del></del>	
(1) Statewide/Legislative/Judge Standing for Retention Candidate / 2	Statewide PAC (3)State Party (4	County Central Co	mmittaa
(5) County Candidate (6) City Candidate (7) School Board or Other F	Political Subdivision Candidate (8	County PAC (9)C	ity PAC
(10 )School Board or Other Political Subdivision PAC (11 ) Local Ball	ot Issue (including committee invo	ved in multiple city/	county ballot issues)
COMMITTEE TREASURER (mandatory for all committees)			
Name $\downarrow \downarrow_{\alpha}$	Name Name		indidate's committee)
- Mari Puner	J. Daniel	White	
Mailing Address South St.	Mailing Address ↓ ↓		
City, State ↓ ↓ Zip Code ↓ ↓	1577 Hwy Jaz		
City, State Zip Code 50066	City, State J Zip Code J L	Taria Car	1 2
1 Joseph (22)	HUTTESTOFT.	Iowa 501	<u> </u>
Phone (641) 872 - 1206	Phone (64/) 877-3600		
•			
e-Mail	e-Mail Cantelwas	Winsonlin	e. com
INDICATE PURPOSE OF COMMITTEE - Check One Box Advice Comment or description:	ocate for/against candidate(s) 🔲 Ad	vocate for ballot issu	e(s)
All Candidates Enter:	L.I. Ad	vocate against hallot	issue(s)
Office Sought:	County/Local Candidates ar	nd Local Ballot Com	mittees Enter:
	County:		
Political Party (if applicable)	(If active in multiple ballot issu	e elections, attach lis	t of counties
District:			it or counties
Year Standing for Election:	Date of Election:		
Bank Account Name (must match committee name)	Candidate name & Address or De		
Bank Account Name (must match committee name)	Candidate name & Address or Pa		fapplicable),
Bank Account Name (must match committee name)		rent Entity (PACs, if filiate, or Sponsor	fapplicable),
Bank Account Name (must match committee name)  ↓ ↓	<u>A</u> 1		f applicable),
Bank Account Name (must match committee name)  ↓ ↓  Name of Financial Institution/type of Account ↓ ↓			f applicable),
Bank Account Name (must match committee name)  ↓ ↓	<u>A</u> 1		f applicable),
Bank Account Name (must match committee name)  ↓ ↓	→ ↓ <u>A</u> f Mailing Address ↓ ↓	ffiliate, or Sponsor	
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